

IC 27-13-39

Chapter 39. Patient Protection; Experimental Treatments

IC 27-13-39-1

Procedures regarding experimental treatments

Sec. 1. (a) A health maintenance organization shall develop and implement a procedure to evaluate whether to provide coverage for new medical technologies and new applications of existing medical technologies, including medical treatments, procedures, drugs, and devices.

(b) A health maintenance organization shall maintain the procedure required under subsection (a) in writing. The written procedure shall describe the process used to determine whether the health maintenance organization will provide coverage for new medical technologies and new uses of existing medical technologies.

(c) The procedure required under this section shall include a review of information from appropriate governmental regulatory bodies and published scientific literature about new medical technologies and new uses of existing medical technologies.

(d) A health maintenance organization shall include appropriate professionals in the decision making process to determine whether new medical technologies and new uses of existing medical technologies qualify for coverage.

As added by P.L.69-1998, SEC.17.

IC 27-13-39-2

Disclosure of coverage limitations

Sec. 2. (a) A health maintenance organization that limits coverage for experimental treatments, procedures, drugs, or devices must clearly state the limitations in any contract, policy, agreement, or certificate of coverage.

(b) The disclosure required under subsection (a) must include the following:

(1) A description of the process used to make the determination regarding a limitation under subsection (a).

(2) A description of the criteria the health maintenance organization uses to determine whether a treatment, procedure, drug, or device is experimental, as provided in section 1 of this chapter.

As added by P.L.69-1998, SEC.17.

IC 27-13-39-3

Written explanation of denial of coverage of experimental treatment; review

Sec. 3. (a) If a health maintenance organization denies coverage for a treatment, procedure, drug, or device on the grounds that the treatment, procedure, drug, or device is experimental, the health maintenance organization shall provide the enrollee with a written explanation that includes the following:

(1) The basis for the denial.

(2) The enrollee's right to appeal the health maintenance organization's decision as provided in IC 27-8-16-8, IC 27-8-17-12, and IC 27-13-10.

(3) The telephone number of:

(A) an individual employed by the health maintenance organization whom; or

(B) a department of the health maintenance organization that;

the enrollee may contact for assistance in initiating an appeal of the health maintenance organization's decision.

(b) An enrollee is entitled to a review that takes not more than seventy-two (72) hours if the enrollee's health situation is life threatening or is an emergency.

As added by P.L.69-1998, SEC.17.